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SEP 12 2 J.S. DISTRICT MID. DIST. TI	COURT FOR THE United State	TATES DISTRICT COURT  25 18 DISTRICT OF TENNESSEE  DIVISION
Ja	Prison Id. NoName  Prison Id. NoName  Prison Id. NoName  Plaintiff(s)	(List the names of all the plaintiffs) (List the names of all the plaintiffs) filing this lawsuit. Do not use "et al." Attach additional sheets if necessary.  Civil Action No.  (To be assigned by the Clerk's office. Do not write in this space.)
· v.		) Jury Trial □ Yes □ No )
_Sony _Dou	na Troutt Name  A Canter Name  Defendant(s)	(List the names of all defendants) against whom you are filing this lawsuit. Do not use "et al." Attach additional sheets if necessary.
		ATION OF CIVIL RIGHTS TTO 42 U.S.C. § 1983
I. PI	REVIOUS LAWSUITS (The following i	nformation must be provided by each plaintiff.)
A.		ffs in this lawsuit filed any other lawsuits in the iddle District of Tennessee, or in any other federal
•	□ Yes ▼ No	
В.	If you checked the box marked "Yes"	above, provide the following information:
	1. Parties to the previous lawsuit:	
	_ ^ 1 .	

2. In what court	did you file the previous lawsuit? NA
	ne lawsuit in federal court, provide the name of the District. If you it in state court, provide the name of the state and the county.
3. What was the	case number of the previous lawsuit?
4. What was the	Judge's name to whom the case was assigned?
	file the previous lawsuit? (Provide the year, i w the exact date.)
6. What was the re appealed, or stil	sult of the previous lawsuit? For example, was the case dismissed, l pending?
	revious lawsuit decided by the court? NA (Provide do not know the exact date.)
	ances of the prior lawsuit involve the same facts or circumstances ging in this lawsuit.
□ Yes	□ No
	d more than one prior lawsuit, list the additional lawsuit(s) on of paper, and provide the same information for the additional
II. THE PLAINTIFF'S CURRED must be provided by each p	NT PLACE OF CONFINEMENT (The following information laintiff.)
A. What is the name and incarcerated? <u>Summer</u>	l address of the prison or jail in which you are currently - County Jail 117 West Smith St.  Smith St.
B. Are the facts of your law	suit related to your present confinement?
Yes 🗆 No	
	marked 'No" in question II.B above, provide the name and ail to which the facts of this lawsuit pertain.
N/h	
D. Do the facts of your laws	uit relate to your confinement in a Tennessee State Prison?
□ Yes   ∇ No	
If you checked the box ma	arked "No," proceed to question II.H.

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		E.	If you checked the box marked "Yes" in question II.D above, have you presented these facts to the prison authorities through the state grievance procedure?				
			□ Y	es	□ No	NI	<b>f</b>
	Ι	F.	If you	u checked	the box marke	ed "Yes	" in question II.E above:
			1.	What step	s did you take	? _ N	A
			2.	What was	the response o	of priso	n authorities? NA
	G	t	If you	checked t	he box marked	1 "No"	in question II.E above, explain why not. MA
	H	1					your confinement in a detention facility operated acies (for example, city or county jail, workhouse,
			Yes	5	□ No		
	I.						n question II.H above, have you presented these detention facility?
	J.	Τf	vou c	hecked the	e box marked '	'Yes" i	n question II.I above:
	••	1.	-				ance and request
		2.	W	hat was the	e response of t	he auth	orities who run the detention facility?
	L.	If y	ou ch		1 '	ر	question II.I above, explain why not.
grie	vance	you	filed	on each is	sue raised in tl	his com	s including, at a minimum, a copy of the plaint, the prison's or jail's response to that from an initial denial of your grievance.
Ш.	PAR	TIES	TO T	THIS LAV	VSUIT		
	A.	Plai	ntiff(s	) bringing	this lawsuit:		
		1.	Nam	ne of the fi	rst plaintiff:	James	Rentro
			Prisc	on Id. No.	of the first plai	intiff: _	71107

Address of the first plaintiff: Summer County Jail 117 West smith st	<u></u>
(Include the name of the institution and mailing address, including zip co If you change your address you must notify the Court immediately.)	ode
2. Name of second the plaintiff:	
Prison Id. No. of the second plaintiff: NA	
Address of the second plaintiff:	
(Include the name of the institution and mailing address, including zip cool If you change your address you must notify the Court immediately.)	de.
If there are more than two plaintiffs, list their names, prison identification numbers, and addresses on a separate sheet of paper.	on.
B. Defendant(s) against whom this lawsuit is being brought:	
1. Name of the first defendant: Sonya Trout	
Place of employment of the first defendant: Summer County Jail	
The first defendant's address: 117 West Smith st. Gallatin In 37066	_ _ _
Named in official capacity?  Yes  No	
2. Name of the second defendant: Doug lanter	
Place of employment of the second defendant: Sumper [ounty Jail	-
The second defendant's address: 117 West Smith 51.	
Named in official capacity?	
If there are more than two defendants against whom you are bringing this lawsuit, you must list on a separate sheet of paper the name of each additional defendant, their place of employment, their address, and the capacity in which you are suing them. If you do not provide the names of such additional defendants, they will not be included in your lawsuit. If you do not provide their proper name, place of employment, and address, the Clerk will be unable to serve them should process issue.	

Defendant #3
Sonny Weatherford Sheriff
117 West Smith St.
Gallatin, Tn. 37066

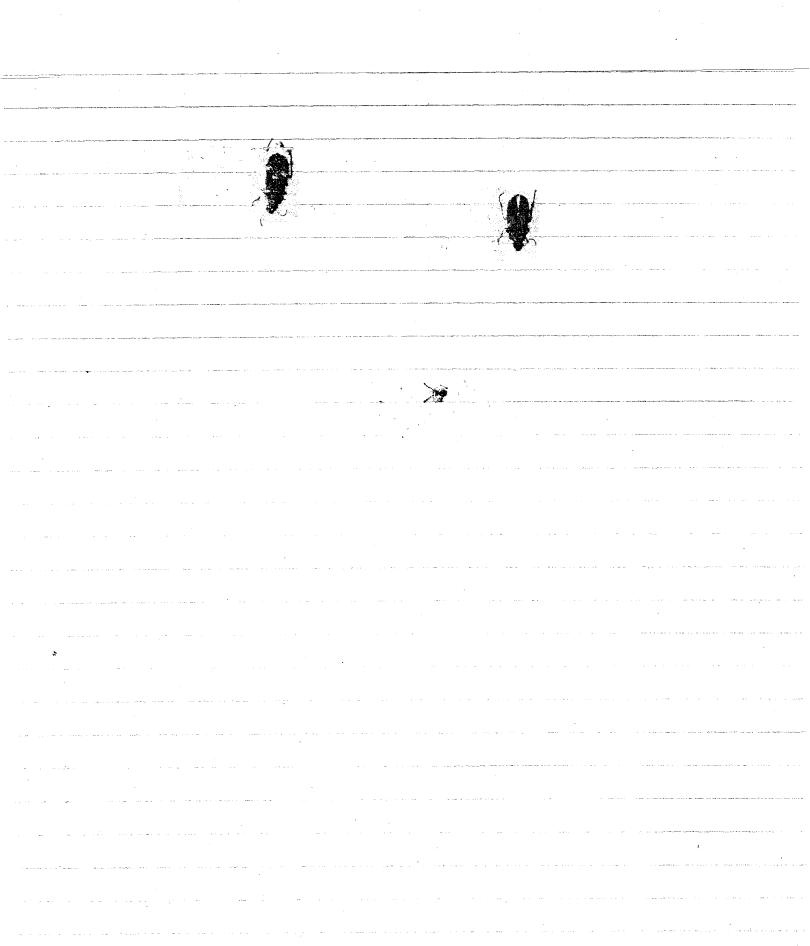
official Capacity

## IV. STATEMENT OF FACTS

State the relevant facts of your case as briefly as possible. Include the dates when the incidents or events occurred, where there they occurred, and how each defendant was involved. Be sure to include the names of other persons involved and the dates and places of their involvement.

If you set forth more than one claim, number each claim separately and set forth each claim in a separate paragraph. Attach additional sheets, if necessary. Use 8 ½ in. x 11 in. paper. Write on one side only, and leave a 1 in. margin on all four 4 sides.

	1. On or about Aug. 02 2011. I was moved from Cell III to a Cell that
	Joes of have a hed or shelves, lell 112 Orders From Search Trouts.
	2. Capt Canter ordered the Sprinkler Heads to be semoved from Coll 112, he States be arrived 30 min Visuals to be done on me but that only occurs
	Presistantly on 3rd shift 1st and 2rd shift do not always do 30 minutes
	visual therefore endangering my life This cell block is manyleged by lamenes
	which will Varify My alligations that the officers we not doing visual
	3. On or about Aug. 14 2011 I have been made to take showers while in
	handcusts and Shackles endangering my Satety. 4. On or about Aug 14 2011 I have been given my tood without Stock.
	Howing to cat all food with my hards. All I been getting is had that I
	Lan ed with my hand there fore endlingering my health due to tack of Proper diet.
	5. I been kept in this Cell with bigs and spiders crawling around on me
	Since Aug 2nd 2011 The Jail has sprayed but they are still here.
•	Properly, Almost never get replys the only physical evidence I have at the
	Ling is these buck in sending with this Complaint. I fear the Administration will
	destroy evidence if they know I have it
	7. Having to drink out of unsanitary looler Reported to staff by request. Problems Keep accurring.
	Trapleary 1886 according.
7	DELTE DE OLIEGTED. Consideration and account and a large last
•	RELIEF REQUESTED: Specify what relief you are requesting against each defendant.
	A. Not to be allowed to do this to anyone else (Sonya Troutt)
	B. not be allowed to do this to compone else (Doug Canter)
	C. It What has been happening to me is Sheriff Dept policy, Change it.
	D. Medical treatment for the physical and mental problems this has exceed
	E. Want to be Compensated for mental and physical agrapish this has Caused
	E. Went to be confensated to mental and physical anguish this has laused
	F. I request a jury trial. Yes \( \simen \text{No} \)



Witness- to My Complaints
Officer Dwanger Witnessed bugs in my Cell
Officer Byld Witnessed bugs
Officer Roth Witnessed bugs and Shower in Cuffs
Officer Derkearmian Witnessed bugs and Shower in handlaffs

## VI. CERTIFICATION

nformati	on, knowledge and belief.	
	Signature: Amis K Real Prison Id. No. 71107	Date: <u>9-3-11</u>
	Prison Id. No. 71107	-
	Address: 117 West Smith St. Gallatin Tr.	37066
	(Include the city, state and zip code.)	<del></del>
	Signature:	Date:
	Prison Id. No.	

I (we) certify under the penalty of perjury that the foregoing complaint is true to the best of my (our)

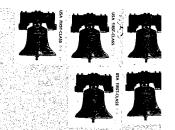
<u>ALL PLAINTIFFS MUST SIGN AND DATE THE COMPLAINT</u>, and provide the information listed above. If there are more than two plaintiffs, attach a separate sheet of paper with their signatures, dates, prison identification numbers, and addresses.

(Include the city, state and zip code.)

ALL PLAINTIFFS MUST COMPLETE, SIGN, AND DATE SEPARATE APPLICATIONS TO PROCEED IN FORMA PAUPERIS, if not paying the civil filing fee.

SUBMIT THE COMPLAINT, THE REQUIRED FILING FEE, OR APPLICATION TO PROCEED IN FORMA PAUPERIS, TOGETHER. Complaints received without the required filing fee or application to proceed in forma pauperis will be returned. Filing fees, or applications to proceed in forma pauperis, received without a complaint will be returned.

James Renfro # 71107 117 Stest Smith Street Gallatin, TN 57066



Mail sent from SUMNER COUNTY JAIL is not inspected or censored. We are not responsible for contents of this letter.

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IN CLERK'S OFFICE
SEP 12 2011
U.S. DISTRICT COURT
MID. DIST. TENN.

Office of the Clerk United States District Court 801 Broadway, Duite 800 Mashville, TN 37203